



**Contract Number**

16-68 A-2

**SAP Number**

## **Arrowhead Regional Medical Center**

**Department Contract Representative** William L. Gilbert  
**Telephone Number** (909) 580-6150

**Contractor** Peter J. Leeson, D.O., Inc.  
**Contractor Representative** Peter Leeson, D.O.  
**Telephone Number** \_\_\_\_\_  
**Contract Term** 03/01/2016 – 02/28/2021  
**Original Contract Amount** \$3,416,714  
**Amendment Amount** \$1,393,388  
**Total Contract Amount** \$4,810,102  
**Cost Center** 9186104200

### **IT IS HEREBY AGREED AS FOLLOWS:**

*(Use space below and additional bond sheets. Set forth service to be rendered, amount to be paid, manner of payment, time for performance or completion, determination of satisfactory performance and cause for termination, other terms and conditions, and attach plans, specifications, and addenda, if any.)*

### **AMENDMENT NO. 2**

Amend Agreement No. 16-68 in the following manner, effective August 20, 2019:

Amend Section 2. SCOPE OF CONSULTATION ENGAGEMENT to read:

- 2.1 Assist the Hospital in the development of a Hospital-physician integration strategy.
- 2.2 Assist the Medical Staff in development of an organization and leadership structure that facilitates development of a provider contracting network.
- 2.3 Assist the Hospital and Medical Staff in implementation of an information management system that allows for an extended provider contracting network and value-based purchasing.
- 2.4 Assist the Hospital in developing and implementing a strategic plan for clinical integration with other healthcare facilities and provider groups in the area.

- 2.5 Assist the Hospital and Medical Staff to assess and prepare for joint capitation and bundled payments.
- 2.6 Assist the Hospital in maintaining compliance with accreditation standards, Title 22 regulations and the Medicare Conditions of Participation (CoPs).
- 2.7 Assist the Hospital and Medical Staff in performing Medical Staff credentialing, quality assessment and peer review functions.
- 2.8 Assist the Hospital and Medical Staff in the performance of Medical Staff ongoing professional practice evaluation, focused professional practice evaluation, investigations and corrective actions.
- 2.9 Act as a consultant to the Hospital's Chief Medical Officer.
- 2.10 Assist in the development of product line specific Centers of Excellence.
- 2.11 Assess the medical education program to ensure the size and scope of each program is in alignment with community and facility needs.
- 2.12 Provide Quality Management and Performance Improvement nurse consultants to work with the Hospital on prioritized process improvement projects.
- 2.13 Provide Life Safety consultants to work with the Hospital on Patient Safety and Environment of Care regulatory compliance.
- 2.14 Assist the Hospital in setting up a Cardiovascular Surgery program.
- 2.15 Assist the Hospital in achieving STEMI Receiving Center designation.
- 2.16 Assist the Hospital with data collection and reporting related to Leapfrog Hospital Safety metrics.
- 2.17 Assist the Hospital in developing product line specific Operational Improvement Committees.
- 2.18 Perform other duties as requested by the Hospital Chief Executive Officer (CEO) and agreed upon by Contractor.
- 2.19 Assist the Hospital in the development and implementation of plans of correction related to CHPH, CMS, Joint Commission and other identified regulatory deficiencies.
- 2.20 Assist the Hospital in monitoring compliance with regulatory plans of correction.
- 2.21 Assist the Hospital in the preparation for continuous survey readiness.
- 2.22 Assist the Hospital achieving Chest Pain Center Certification with the American College of Cardiology.
- 2.23 Assist the Hospital in collection and assessment of Cardiac Cath Lab and Cardiac Surgery performance data.
- 2.24 Work with the Medical Staff in updating the Bylaws, Rules and Regulations and Medical Staff Policies.
- 2.25 Work with the Hospital in the performance of a comprehensive Environment of care survey readiness assessment.
- 2.26 Assist Hospital staff in the development of new and updated Environment of Care Policies and Plans.
- 2.27 Assist Hospital staff in setting up new Environment of Care and Life Safety Agilis software and tracking tool.
- 2.28 Facilitate the development of Medical Staff OPPE in the Truven (IBM- Watson) program.
- 2.29 Provide a technical expert to update the Hospital's Medical Staff Credentialing and Ordering Physician software system.
- 2.30 Provide a technical expert to update the Medical Staff's Peer Review software system and validate the HL 7 interface.
- 2.31 Facilitate the interface between the new EHR and existing Medical Staff Software programs.
- 2.32 Work with the Hospital executive team to develop and implement a Strategic Work Plan covering the Hospital's physical plant and the Hospital's clinical services.

Amend Section 3. CONTRACTOR'S FEES, AUTHORIZED CONSULTING TIME AND CONTRACT MAXIMUM to read:

3.1 Professional Fees and Expected Time.

- 3.1.1 Peter J Leeson, D.O. - \$3,200 per day (8 hours per day) plus reasonable travel and related expenses for on-site consulting services. Off-site consulting services, including review of documents and preparation of reports, will be billed at \$320 per hour plus reasonable expenses. Off-site expenses include transcription, supplies, and other expenses directly related to the project.  
All on-site consulting services performed by employees and/or subcontractors of Peter J. Leeson, D.O. Inc. shall be paid at the rate of \$2,400 per day plus reasonable travel and related expenses. All off-site consulting services performed by employees and/or subcontractors of Peter J. Leeson, D.O. Inc. shall be paid at the rate of \$240 per hour plus reasonable expenses.
- 3.1.2 Expected on-site services of approximately twenty-three to twenty-eight (23-28) days per month.
- 3.1.3 Expected off-site services of approximately one hundred to one hundred forty (100-140) hours per month.

3.2 CONTRACT MAXIMUM

- 3.2.1 The maximum contract payment amount per year one and two is \$499,200 plus reasonable expenses in the amount of \$46,080 year one and \$47,462 year two. The maximum contract payment amount for year three is \$726,062 plus reasonable expenses in the amount of \$48,862. The maximum contract payment amount for year four is \$1,340,736 plus reasonable expenses in the amount of \$104,816. The maximum contract payment amount for year five is \$1,388,722 plus reasonable expenses in the amount of \$108,962.
- 3.2.2 The maximum contract payment amount over the five (5) year term is \$4,810,102.

Amend Section 9. TERM to read:

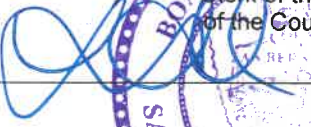
- 9.1 The term of this agreement shall be from March 1, 2016 to February 28, 2021 inclusive.
- 9.2 Grounds for Early Termination. Hospital and Contractor shall each have the right to terminate this Agreement:
- 9.2.1 Immediately upon mutual consent, or;
- 9.2.2 Upon written notice to the other party in the event of a breach of the terms of this Agreement by the other party. When a party receives notice of breach, the party receiving such notice shall have 14 days from receipt of notice to cure the breach. If the party receiving notice is unable to cure the breach, this shall be considered grounds for early termination, or;
- 9.2.3 Within 30 days upon written notice from the other party with or without cause.

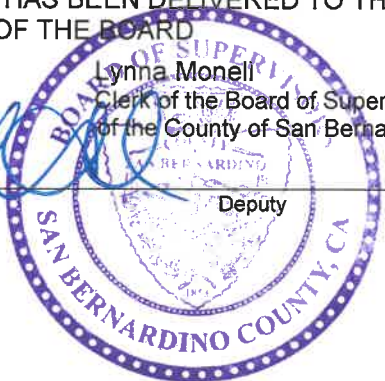
All other terms and conditions of Agreement No. 16-68 shall remain in full force and effect.

COUNTY OF SAN BERNARDINO

By   
Curt Hagman, Chairman, Board of Supervisors

Dated: AUG 20 2019  
SIGNED AND CERTIFIED THAT A COPY OF THIS  
DOCUMENT HAS BEEN DELIVERED TO THE  
CHAIRMAN OF THE BOARD

By   
Lynna Monelli  
Clerk of the Board of Supervisors  
of the County of San Bernardino  
Deputy



PETER J. LEESON, D.O., INC.

(Print or type name of corporation, company, contractor, etc.)

By   
(Authorized signature - sign in blue ink)

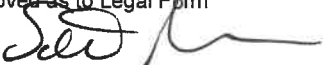
Name Peter J. Leeson, D.O.  
(Print or type name of person signing contract)

Title President  
(Print or Type)


Dated: 7-29-19

Address 32174 Oakshore Dr.  
Westlake Village, CA 91361

FOR COUNTY USE ONLY

Approved as to Legal Form  
By   
Scott Runyan, Deputy County Counsel  
Date 8-13-19

Reviewed for Contract Compliance  
By \_\_\_\_\_  
Date \_\_\_\_\_

Reviewed/Approved by Department  
By   
William L. Gilbert, Director  
Date 8/9/19